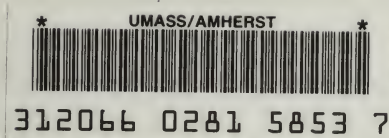


MASS. J1.202:y88



YOUR RIGHTS REGARDING

RESTRAINT AND SECLUSION

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MENTAL HEALTH LEGAL ADVISORS COMMITTEE

MARCH 1988

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Effective July 1, 1987, Massachusetts has a new law regulating the use of physical, mechanical, and chemical restraint and seclusion in mental health facilities, including Bridgewater State Hospital. Patients can only be restrained or secluded when emergency circumstances exist, such as the occurrence of, or serious threat of, extreme violence, personal injury, or attempted suicide, and then only if the facility staff strictly complies with the new law (Massachusetts General Laws, chapter 123, section 21).

If you believe that you have been improperly restrained or secluded, you have the right to file a complaint or take legal action. You may request additional information and assistance from one of the advocacy groups listed below.

### What Is Restraint ?

'Restraint' is an all-inclusive term for the interventions which the law permits psychiatric facility staff to use to physically control patients who are acting, or threatening to act, in a violent way toward themselves or others. Four types of restraint are permitted:

- physical restraint : bodily force used to limit a patient's freedom of movement (but not including firm, but gentle holding of a patient for less than five minutes, or holding necessary to complete medical examinations or treatment).
- mechanical restraint: the use of physical devices to restrict a patient's movement or the normal function of part of his body (but not including medically-prescribed appliances, bandages, protective helmets, etc.)
- chemical restraint: the involuntary administration of medication used to restrain (rather than treat) a patient.
- seclusion: seclusion occurs when a patient is both confined and isolated in any of the following situations:
  - \* when the patient is placed alone in a room with a closed door (or an open door if the location of the room does not provide visual and verbal contact with other patients or staff) and any

attempt to leave will (or it is reasonably believed by the patient that it will) be blocked either because the room is locked or staff will intervene.

- \* when the patient is confined in an isolated room - with either a closed or open door - and any attempt to leave will (or it is reasonably believed by the patient that it will) result in the imposition of sanctions against the patient such as the loss of privileges.

### When Can Restraint Be Used ?

As noted above, restraint can only be employed to prevent violence in an emergency situation. It cannot be used as treatment, as a behavior modification technique, as punishment, or to manage patients for the convenience of staff. "P.R.N." ("as needed") orders for restraint are illegal.

Written authorization for restraint must be given by the superintendent or director of the facility or by a designated physician if one of these persons is present when the emergency occurs. If they are not present, other staff can order non-chemical restraint for up to one hour provided the superintendent, director, or designated physician examines the person restrained within that hour. If the examination has not been done within the first hour, and the emergency continues to exist, non-chemical restraint may be continued until the exam occurs for up to an additional hour, but the superintendent, director, or designated physician must attach to the restraint form a written statement as to why the examination was not completed within the first hour. A patient who has not been examined by the superintendent, director, or designated physician within two hours must be released from restraint.

### The Restraint of Minors

Minors (those under 18 yrs.) may only be secluded if the facility in which they are a patient has been inspected and specially certified by the Department of

Mental Health. Minors may not be secluded for more than two hours in any 24 hour period. Any restraint of a minor exceeding one hour in a 24 hour period must be reviewed by the director of the facility within two working days. The director must also compile a report of every use of restraint in the facility, and forward it to the Human Rights Committee on a monthly basis.

## Additional Restrictions On The Use Of Restraint

### Duration

No order for restraint is valid for more than three hours. A minor can be restrained beyond that time only if the order is renewed after a personal examination by the superintendent, director, or authorized physician. An adult can be restrained beyond the initial three hour period only if the order is renewed by one of those professionals or by a registered nurse or certified physician assistant. Adults cannot be restrained beyond six hours unless they are personally examined by a physician who renews the order. An adult cannot be maintained in restraint more than eight hours in any 24 hour period unless it is authorized by the superintendent, director, or a person authorized to do so in their absence. Each time that restraint is ordered or renewed, the person authorizing it must note the reasons for its (continued) use on a written form.

### Observation

No patient may be kept in restraint without a person in attendance specially trained to understand, assist, and afford therapy to them. When a patient is secluded without mechanical restraint, the observer may be outside the room so long as the patient can be kept in full view. If specially trained personnel are not available due to an emergency, an adult may be restrained unattended for up to two hours. In that event, however, the patient must be observed by other staff at least every five minutes, and the restraint report must state why no specially trained observers were available.



## Chemical Restraint

Medication cannot be ordered for any purpose, including as chemical restraint, except by a physician. An order for chemical restraint issued by a designated physician who is not present (i.e. over the telephone) is permissible only if that doctor has spoken with a registered nurse or certified physician assistant who has personally examined the patient; only if the chemical restraint is the least restrictive, most appropriate, alternative available to manage the emergency; and only if the medication in question has been previously authorized as part of the patient's current treatment plan.

## Documentation/Comment

No later than 24 hours after a period of restraint, the patient must receive a copy of the restraint report form, and must be permitted to attach his written comments concerning the circumstances leading to the use of restraint and the manner in which it was employed. The restraint form and any attachments must be placed in the patient's chart, and a copy sent to the DMH Commissioner. The Commissioner must review and sign all restraint forms within thirty days. Statistical records must be kept for each facility and designated physician ordering restraint. All reports regarding restraint - with patient names deleted - must be made available to the public at the DMH central office, 160 North Washington St., Boston, MA.

For more information about your rights regarding restraint, or to seek legal assistance, if you believe your rights have been violated, contact your Human Rights Officer, a member of your Human Rights Committee, or one of the advocacy organizations listed below:

Mental Health Legal Advisors Committee  
11 Beacon St. Rm. 925, Boston, MA 02108  
(617) 723-9130; (WATS) 1-800-342-9092

(over)

Center for Public Representation  
22 Green St. Northampton, MA 01060  
(413) 584-1644 x 265

Legal Assistance Corp. of Central Mass.  
332 Main St. Suite 320  
Worcester, MA 01608  
(617) 752-3718; 752-4618 x336 (Worcester State Hosp.)

Southeastern Mass. Legal Assistance Corp.  
261 Union St. New Bedford, MA 02740  
(617) 997-9781; 824-7551 x 344 (Taunton State Hosp.)

Cambridge and Somerville Legal Services, Inc.  
264 Third St. Cambridge, MA 02142  
(617) 492-5520, 5525 (TTD); 894-3600 (Metropolitan  
State Hosp.)

If you are a patient, staff can provide the  
name and telephone number of the following for your  
hospital:

Human Rights Officer: \_\_\_\_\_  
Office location: \_\_\_\_\_  
Phone: \_\_\_\_\_

Human Rights Committee Chm.: \_\_\_\_\_  
Phone: \_\_\_\_\_



